

STATE OF _____

COUNTY OF _____

Re: Facility Name

Project #

Response to RFAI

I certify, under penalty of perjury, that all of the information in this affidavit and any document submitted with it were provided or authorized by me. I have reviewed and understand all of the information contained in and submitted with my affidavit and any submitted documents, and certify that all of this information is complete, true, and correct.

Signature

Date

Print Name

Title

On the _____ day of _____ in the year _____, before me, the undersigned notary public, personally appeared,

_____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.